Attorney's Docket No.

COMBINED DECLARATION FOR TENT APPLICATION AND POWER OF

includes Reference to PCT International Applications) FI-52PCT						
As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name,						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: AGENT FOR PRODUCING A SENSATION OF SAFIETY AND FOR WEIGHT LOSS						
the specification	n of which (check only o	one item below):				
is attached here	is attached hereto.					
was filed as Uni	was filed as United States application					
on, and was amended						
on	on(if applicable).					
X was filed as PCT international application						
Number <u>PCT/EP</u> on <u>April</u>		· · · · · · · · · · · · · · · · · · ·				
and was amended under PCT Article 19 on(if applicable).						
I hereby state that we have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. We acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:						
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:						
COUNTRY (if PCT, indicate PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119			
GERMANY	102 16 551.3	15 April 2002	X YES NO			

PTO-1391 (REV. 10-83)

GERMANY

YES

NO

202 05 854.9

15 April 2002

Docket No. FI-52

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of the application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, We acknowledge the duty of disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occured between the filing date of the prior application(s) and the national or PCT internation filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

Ţ	STATUS (CHECK ONE)				
U.S. APPLICATION NUMBER		S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT APPLICAT					
PCT APPLICATION NO.	APPLICATION NO. PCT FILING DATE				

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

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	FULL NAME OF INVENTOR	Family Name	<u>First Given Name</u>	Second Given Name	
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U.S. DEPARIMENT OF COMMERCE - Patent and Trademark Office

Combined Declaration For tent Application and Power of Abrney (Continued) (includes Reference to PCT International Applications) Docket No. FI-52							
2.	FULL NAME OF INVENTOR	Family Name	(*) (*)	<u>First Given Nar</u>	<u>me</u>	<u>Second G.</u>	iven Name
0	RESIDENCE & CITIZENSHIP			State Or Foreig	an Country	<u>Citizenship</u> <u>State & Zip Code</u>	
2	POST OFFICE ADDRESS	Post Office Add	ress	City			
2	FULL NAME OF INVENIOR	Family Name		First Given Name		Second G.	iven Name
0	RESIDENCE & CITIZENSHIP	<u>City</u>		State Or Foreign Country		<u>Citizenship</u>	
3	POST OFFICE ADDRESS	Post Office Address		City		State & Zip Code	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
SIGNATURE OF INVENTOR 201			SIGNATURE OF INVENTOR 202 SIGNA		SIGNATURI	ATURE OF INVENTOR 203	
DATE 1			DATE	ATE		DATE	

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